



**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Application Number	09/842,484
Filing Date	04/25/2001
First Named Inventor	Paul L. DeAngelis
Art Unit	1623
Examiner Name	M. Henry
Attorney Docket Number	4605 003

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC		
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences		
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information		
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation of POA	<input type="checkbox"/> Status Letter		
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):		
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	See Below		
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund			
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____			
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD			
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<table border="1"> <tr> <td>Remarks</td> </tr> <tr> <td>1. Transmittal Form (1 page); 2. Response (1 page); 3. Extension of Time - 3 months (1 page); 4. Credit Card Payment form (1 page); and 5. Return Receipt Postcard.</td> </tr> </table>		Remarks	1. Transmittal Form (1 page); 2. Response (1 page); 3. Extension of Time - 3 months (1 page); 4. Credit Card Payment form (1 page); and 5. Return Receipt Postcard.
Remarks				
1. Transmittal Form (1 page); 2. Response (1 page); 3. Extension of Time - 3 months (1 page); 4. Credit Card Payment form (1 page); and 5. Return Receipt Postcard.				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	DUNLAP, CODDING & ROGERS, P.C.		
Signature			
Printed name	Douglas J. Sorocco		
Date	01/24/2005	Reg. No.	43,145

CERTIFICATE OF TRANSMISSION/MAILING

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Signature

→ Typed or printed name

Douglas J. Sorocco

Date 21/04/2005

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